

**MEDICAL BOARD OF CALIFORNIA - 2013 TRACKER LIST**  
**January 29, 2014**

Agenda Item 29 B

BILL	AUTHOR	TITLE	STATUS	POSITION	AMENDED
AB 186	Maienschein	Professions & Vocations: Military Spouses: Temporary Licenses	Sen. B&P	Support – 2-year Bill	6/24/13
AB 496	Gordon	Task Force: LGBTI Cultural Competency	Inactive File	Support – 2-year Bill	6/25/13
AB 809	Logue	Healing Arts: Telehealth	Sen. Health	Support – 2-year Bill	6/25/13
AB 831	Bloom	Drug Overdoses	Held in Approps.	Support – 2-year Bill	4/3/13
AB 860	Perea	Medical School Scholarships	Held in Approps.	Support – 2-year Bill	4/8/13
AB 916	Eggman	Healing Arts: False or Misleading Advertising	Sen. B&P	Support – 2-year Bill	Intro.
AB 1176	Bocanegra & Bonta	Medical Residency Training Program Grants	Held in Approps.	Support – 2-year Bill	4/23/13
AB 1182	Brown	Medically Underserved Areas	Assembly	SPOT	Intro.
AB 1269	Gray	Medicine: Special Faculty Permit	Asm. B&P	SPOT	Intro.
AB 1535	Bloom	Pharmacists: Naloxone Hydrochloride	Introduced	Reco: Support	Intro
SB 20	Hernandez	Health Care: Workforce Training	Held in Approps.	Support – 2-year Bill	2/14/13
SB 439	Steinberg	Medical Marijuana	Asm. Health	2-year Bill	8/5/13
SB 491	Hernandez	Nurse Practitioners	Held in Approps.	Oppose – 2-year Bill	8/14/13
SB 492	Hernandez	Optometrist Practice: Licensure	Asm. B&P	OUA – 2-year Bill	8/5/13
SB 500	Lieu	Medical Practice: Pain Management	Assembly	Reco: Support	1/9/14
SB 796	Nielsen	Medicine: Physicians and Surgeons	Senate	SPOT	Intro.

Green – For Discussion, Blue – Spot or 2-year Bill

# 2014 TENTATIVE LEGISLATIVE CALENDAR

Agenda Item 29B

COMPILED BY THE OFFICES OF THE SECRETARY OF THE SENATE & THE ASSEMBLY CHIEF CLERK  
October 22, 2013

## DEADLINES

JANUARY						
S	M	T	W	TH	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

FEBRUARY						
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MARCH						
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30	31					

APRIL						
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27	28	29	30			

**Jan. 1** Statutes take effect (Art. IV, Sec. 8(c)).

**Jan. 6** Legislature Reconvenes (J.R. 51(a)(4)).

**Jan. 10** Budget must be submitted by Governor (Art. IV, Sec. 12(a)).

**Jan. 17** Last day for **policy committees** to hear and report to Fiscal committees fiscal bills introduced in their house in 2013 (J.R. 61(b)(1)).

**Jan. 20** Martin Luther King, Jr. Day.

**Jan. 24** Last day for any committee to hear and report to the **Floor** bills introduced in their house in 2013 (J.R. 61(b)(2)). Last day to submit **bill requests** to the Office of Legislative Counsel.

**Jan. 31** Last day for each house to **pass bills introduced in 2013** in their House (Art. IV, Sec. 10(c)), (J.R. 61(b)(3)).

**Feb. 17** President's Day.

**Feb. 21** Last day for bills to be **introduced** (J.R. 61(b)(4)), (J.R. 54(a)).

**Mar. 31** Cesar Chavez Day

**Apr. 10** **Spring Recess** begins at end of this day's session (J.R. 51(b)(1)).

**Apr. 21** Legislature reconvenes from **Spring Recess** (J.R. 51(b)(1)).

# 2014 TENTATIVE LEGISLATIVE CALENDAR

Agenda Item 29B

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October 22, 2013

MAY						
S	M	T	W	TH	F	S
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**May 2** Last day for **policy committees** to hear and report to Fiscal Committees **fiscal bills** introduced in their house (J.R. 61(b)(5)).

**May 9** Last day for **policy committees** to hear and report to the floor **non-fiscal** bills introduced in their house (J.R. 61(b)(6)).

**May 16** Last day for **policy committees** to meet prior to June 2 (J.R. 61(b)(7)).

**May 23** Last day for **fiscal committees** to hear and report to the floor Bills introduced in their house (J.R. 61(b)(8)). Last day for **fiscal Committees** to meet prior to June 2 (J.R. 61 (b)(9)).

**May 26** Memorial Day

**May 27 - 30 Floor Session Only.** No committee may meet for any purpose (J.R. 61(b)(10)).

**May 30** Last day for bills to be **passed out of the house of origin** (J.R. 61(b)(11)).

JUNE						
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**June 2** Committee meetings may resume (J.R. 61(b)(12)).

**June 15** **Budget** must be **passed by midnight** (Art. IV, Sec. 12(c)(3)).

**June 26** Last day for a legislative measure to qualify for the November 4 general election ballot (Election code Sec. 9040).

**June 27** Last day for **policy committees** to meet and report bills (J.R. 61(b)(13)).

JULY						
S	M	T	W	TH	F	S
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**July 3** **Summer Recess** begins at the end of this day's session if Budget Bill has been passed (J.R. 51(b)(2)).

**July 4** Independence Day

AUGUST						
S	M	T	W	TH	F	S
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31						

**Aug. 4** Legislature reconvenes from **Summer Recess** (J.R. 51(b)(2)).

**Aug. 15** Last day for **fiscal committees** to meet and report bills to the Floor (J.R. 61(b)(14)).

**Aug. 18 – 31 Floor Session only.** No committees, other than conference committees and Rules committee, may meet for any purpose (J.R. 61(b)(15)).

**Aug. 22** Last day to **amend bills** on the Floor (J.R. 61(b)(16)).

**Aug. 31** Last day for **each house to pass bills** (Art. IV, Sec. 10(c)), (J.R. 61(b)(17)). **Final recess** begins at the end of this day's session (J.R. 51(b)(3)).

BRD 29B-3

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**IMPORTANT DATES OCCURRING DURING FINAL RECESS**

**2014**

Sept. 30      Last day for Governor to sign or veto bills passed by the Legislature before Sept. 1 and in the Governor's possession on or after Sept. 1 (Art. IV, Sec. 10(b)(2)).

Nov. 4        General Election

Nov. 30      Adjournment Sine Die at midnight (Art. IV, Sec. 3(a)).

Dec. 1        12 m. convening of 2015-16 Regular Session (Art. IV, Sec. 3(a)).

**2015**

Jan. 1        Statutes take effect (Art. IV, Sec. 8(c)).

Jan. 5        Legislature reconvenes (JR 51(a)(1)).

MEDICAL BOARD OF CALIFORNIA  
LEGISLATIVE ANALYSIS

**Bill Number:** AB 1535  
**Author:** Bloom  
**Bill Date:** January 21, 2014, Introduced  
**Subject:** Pharmacists: Naloxone Hydrochloride  
**Sponsor:** Drug Policy Alliance  
 California Pharmacists Association

**DESCRIPTION OF CURRENT LEGISLATION:**

This bill allows pharmacists to furnish naloxone hydrochloride in accordance with standardized procedures developed by the pharmacist and an authorized prescriber acting within the scope of his or her practice, or in accordance with standardized procedures or protocols developed and approved by the Board of Pharmacy (BOP) and the Medical Board of California (Board). This bill would require a pharmacist to complete a training program on the use of opioid antagonists that consists of at least one hour of approved continuing education on the use of naloxone hydrochloride, before furnishing naloxone hydrochloride.

**BACKGROUND**

Naloxone is used in opioid overdoses to counteract life-threatening depression of the central nervous system and respiratory system, allowing an overdosing person to breathe normally. Naloxone is a non-scheduled, inexpensive prescription medication with the same level of regulation as ibuprofen. Naloxone only works if a person has opioids in their system, and has no effect if opioids are absent.

According to the fact sheet, public health experts agree that increasing access to naloxone is a key strategy in preventing drug overdose deaths. The American Medical Association, the White House Office of National Drug Control Policy, the Director of the National Institutes of Drug Abuse, among others, have called for providing naloxone to at-risk patients, first responders, and persons likely to witness a potentially fatal opioid overdose.

**ANALYSIS**

AB 635 (Ammiano, Chapter 707, Statutes of 2013) was signed into law by the Governor and was supported by the Board. This new law allows health care providers to prescribe, dispense, and issue standing orders for an opioid antagonist to persons at risk of overdose, or their family member, friend, or other person in a position to assist persons at risk, without making them professionally, civilly or criminally liable, if acting within reasonable care. It also extends this same liability protection to individuals assisting in dispensing, distributing, or administering the opioid antagonist during an overdose. This law requires a person who is prescribed or possesses an opioid antagonist pursuant to a standing order to

receive training provided by an opioid overdose prevention and treatment training program.

This bill would further increase access to naloxone by allowing community pharmacists to provide naloxone to at-risk patients pursuant to standardized procedures developed by the pharmacist and an authorized prescriber acting within the scope of his or her practice, or in accordance with standardized procedures or protocols developed and approved by BOP and the Board. This bill would also require a pharmacist to complete a training program on the use of opioid antagonists that consists of at least one hour of approved continuing education on the use of naloxone hydrochloride, before furnishing naloxone hydrochloride.

Drug overdoses are now the leading cause of injury death in the United States, surpassing motor vehicle crash deaths. The Board supported AB 635 because it encourages licensed healthcare providers to begin prescribing naloxone to patients on chronic opioid pain medications in order to help address the prescription drug overdose epidemic, furthering the Board's mission of consumer protection. This bill will also increase at-risk patient's access to naloxone, while at the same time ensuring standardized procedures and protocols are in place. Board staff is suggesting that the Board take a support position on this bill

**FISCAL:** Minimal and absorbable fiscal to develop standardized procedures and protocols with the BOP.

**SUPPORT:** California Pharmacists Association (sponsor) and Drug Policy Alliance (Sponsor)

**OPPOSITION:** None on file

**POSITION:** Recommendation: Support

**ASSEMBLY BILL**

**No. 1535**

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**Introduced by Assembly Member Bloom**

January 21, 2014

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An act to add Section 4052.01 to the Business and Professions Code, relating to pharmacists.

LEGISLATIVE COUNSEL'S DIGEST

AB 1535, as introduced, Bloom. Pharmacists: naloxone hydrochloride.

Existing law, the Pharmacy Law, provides for the licensure and regulation of pharmacists by the California State Board of Pharmacy. Existing law, generally, authorizes a pharmacist to dispense or furnish drugs only pursuant to a valid prescription. Existing law authorizes a pharmacist to furnish emergency contraceptives and hormonal contraceptives pursuant to standardized procedures or protocols developed and approved by both the board and the Medical Board of California, as specified, or developed by the pharmacist and an authorized prescriber. Existing law also authorizes a pharmacist to furnish nicotine replacement products pursuant to standardized procedures or protocols developed and approved by both the board and the Medical Board of California, as specified. Existing law authorizes a licensed health care provider who is permitted to prescribe an opioid antagonist and is acting with reasonable care to prescribe and dispense or distribute an opioid antagonist for the treatment of an opioid overdose to a person at risk of an opioid-related overdose or a family member, friend, or other person in a position to assist a person at risk of an opioid-related overdose.

This bill would authorize a pharmacist to furnish naloxone hydrochloride in accordance with standardized procedures or protocols developed by the pharmacist and an authorized prescriber or developed and approved by both the board and the Medical Board of California. The bill would require a pharmacist to complete a training program on the use of opioid antagonists prior to performing this procedure.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

- 1 SECTION 1. Section 4052.01 is added to the Business and
- 2 Professions Code, to read:
- 3 4052.01. (a) Notwithstanding any other provision of law, a
- 4 pharmacist may furnish naloxone hydrochloride in accordance
- 5 with either of the following:
- 6 (1) Standardized procedures or protocols developed by the
- 7 pharmacist and an authorized prescriber who is acting within his
- 8 or her scope of practice.
- 9 (2) Standardized procedures or protocols developed and
- 10 approved by both the board and the Medical Board of California.
- 11 (b) Prior to performing a procedure authorized under this section,
- 12 a pharmacist shall complete a training program on the use of opioid
- 13 antagonists that consists of at least one hour of approved continuing
- 14 education on the use of naloxone hydrochloride.



MEDICAL BOARD OF CALIFORNIA  
LEGISLATIVE ANALYSIS

**Bill Number:** SB 500  
**Author:** Lieu  
**Bill Date:** January 9, 2014, Amended  
**Subject:** Medical Practice: Pain Management  
**Sponsor:** Author

**DESCRIPTION OF CURRENT LEGISLATION:**

This bill would require the Medical Board of California (Board) to update the pain management guidelines every five years, beginning July 1, 2015. This bill would require the Board to convene a task force to develop and recommend the revised guidelines to the Board. This bill would allow the Task Force to consult with specified entities when developing the revisions to the pain management guidelines.

**ANALYSIS**

At the April 25, 2013 Enforcement Committee Meeting, the Committee established a Prescribing Task Force. This Task Force was convened to further define best practices related to prescribing controlled substances and to revisit the pain management guidelines to address the serious problem of inappropriate prescribing. The Task Force had its first meeting on September 23, 2013, and discussed corresponding responsibilities of physicians and pharmacists for prescribing and dispensing. The next Prescribing Task Force is set for February 19, 2014, and at this meeting the discussion will focus on revisions to the pain management guidelines.

This bill would require the Board to update the pain management guidelines every five years, beginning July 1, 2015. This bill would require the Board to convene a task force to develop and recommend the revised guidelines to the Board. Lastly, this bill would allow the Task Force to consult with the American Pain Society, the American Academy of Pain Medicine, the California Society of Anesthesiologists, the California Chapter of the American College of Physicians, the American Cancer Society, a physician who treats or evaluates patients as part of the workers compensation system, other medical entities specializing in pain control therapies, and specialists in pharmacology and addiction medicine, when developing the revisions to the pain management guidelines.

This bill would codify work that the Board has already begun to address the important consumer protection issue of inappropriate prescribing. The Board has identified revising these guidelines as an important tool to help combat inappropriate prescribing. This bill will ensure that the pain management guidelines are revised, and then reviewed in a consistent, ongoing manner to provide appropriate guidance to physicians who are prescribing pain

medication. Board staff suggests the Board support this bill, as it furthers the Board's mission of consumer protection.

**FISCAL:** Minimal and absorbable fiscal, as a task force has already been convened and meetings are already planned to address this issue.

**SUPPORT:** None on file

**OPPOSITION:** None on file

**POSITION:** Recommendation: Support

AMENDED IN SENATE JANUARY 9, 2014

AMENDED IN SENATE JANUARY 6, 2014

**SENATE BILL**

**No. 500**

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**Introduced by Senator Lieu**

February 21, 2013

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An act to amend Section 2241.6 of the Business and Professions Code, relating to healing arts.

LEGISLATIVE COUNSEL'S DIGEST

SB 500, as amended, Lieu. Medical practice: pain management.

Existing law establishes the Medical Board of California within the Department of Consumer Affairs. Existing law, among other things, required the board to develop standards before June 1, 2002, to ensure the competent review in cases concerning the management, including, but not limited to, the undertreatment, undermedication, and overmedication of a patient's pain.

This bill would require the board, on or before July 1, 2015, to update those standards. The bill would require the board to convene a task force to develop and recommend the updated standards to the board. The bill would also require the board to update those standards on or before July 1 each 5th year thereafter.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

- 1 SECTION 1. Section 2241.6 of the Business and Professions
- 2 Code is amended to read:

1 2241.6. (a) (1) The board shall develop standards before June  
2 1, 2002, to ensure the competent review in cases concerning the  
3 management, including, but not limited to, the undertreatment,  
4 undermedication, and overmedication of a patient's pain.

5 (2) The ~~division~~ *board* may consult with entities such as the  
6 American Pain Society, the American Academy of Pain Medicine,  
7 the California Society of Anesthesiologists, the California Chapter  
8 of the American College of Emergency Physicians, and any other  
9 medical entity specializing in pain control therapies to develop the  
10 standards utilizing, to the extent they are applicable, current  
11 authoritative clinical practice guidelines.

12 (b) The board shall update the standards adopted pursuant to  
13 subdivision (a) on or before July 1, 2015, and on or before July 1  
14 each fifth year thereafter.

15 (c) The board shall convene a task force to develop and  
16 recommend the updated standards to the board. The task force, in  
17 developing the updated standards, ~~shall~~ *may* consult with the  
18 entities specified in paragraph (2) of subdivision (a), the American  
19 Cancer Society, *a physician who treats or evaluates patients as*  
20 *part of the workers' compensation system*, and specialists in  
21 pharmacology and addiction medicine.

**MBC TRACKER II BILLS**  
**1/29/2014**

Agenda Item 29 B

<b>BILL</b>	<b>AUTHOR</b>	<b>TITLE</b>	<b>STATUS</b>	<b>AMENDED</b>
AB 18	Pan	Individual Health Care Coverage	2-year	06/24/13
AB 357	Pan	California Healthy Child Advisory Task Force	2-year	01/16/14
AB 369	Pan	Continuity of Care	2-year	01/16/14
AB 395	Fox	Alcoholism and Drug Abuse Treatment Facilities	2-year	07/10/13
AB 467	Stone	Prescription Drugs: Collection and Distribution Program	2-year	01/07/14
AB 473	Ammiano	Medical Marijuana: State Regulation and Enforcement	2-year	05/24/13
AB 678	Gordon	Health Care Districts: Community Health Needs Assessment	2-year	04/15/13
AB 889	Frazier	Health Care Coverage: Prescription Drugs	2-year	05/02/13
AB 975	Wieckowski & Bonta	Health Facilities: Community Benefits	2-year	05/24/13
AB 1310	Brown	Medi-Cal: Pediatric Subacute Care	2-year	05/24/13
AB 1558	Hernandez	California Health Data Organization	Introduced	01/28/14
ACA 1	Donnelly	Administrative Regulations: Legislative Approval	2-year	12/03/12
ACA 5	Grove	Abortion: Parental Notification	2-year	01/07/14
SB 18	Hernandez	California Health Benefits Review Program	2-year	04/17/13
SB 22	Beall	Health Care Coverage: Mental Health Parity	2-year	07/02/13
SB 176	Galgiani	Administrative Procedures	2-year	08/07/13
SB 204	Corbett	Prescription Drugs: Labeling	2-year	06/27/13
SB 218	Yee	Healing Arts: Ca Traditional Chinese Medicine Traumatologist	2-year	08/05/13
SB 248	Wyland	Professional Corporations	2-year	
SB 270	Padilla	Underground Economy: Enforcement Actions	2-year	
SB 577	Pavley	Autism & Other Developmental Disabilities: Employment	2-year	01/06/14
SB 799	Calderon	Health Care Coverage: Colorectal Cancer: Testing & Screening	2-year	05/08/13
SB 830	Galgiani	Health Care: Health Facility Data	Introduced	01/06/14